Application Data Sheet

Application Information

Application number:: Unassigned

Filing Date:: 11/09/01

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Method and System For Testing Foam-Water Fire

Protection Systems

Attorney Docket Number:: 005235.00002

Request for Early Publication?:: NO

Request for Non-Publication?:: NO

Suggested Drawing Figure::

Total Drawing Sheets:: 4

Small Entity?:: YES

Latin name::

Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency:: No

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: NO

Applicant Information

City of mailing address::

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Thomas
Middle Name::	Joseph
Family Name::	Boyle
Name Suffix::	
City of Residence::	Galloway
State or Province of Residence::	Ohio
Country of Residence::	USA
Street of mailing address::	P.O. Box 20
City of mailing address::	Galloway
State or Province of mailing address::	Ohio
Country of mailing address::	usa
Postal or Zip Code of mailing address::	43119
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	

State or Provin	ce of mailin	ια address∷
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Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Status::

Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number::

22907

Representative Information

Representative Customer Number::

22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
Provisional			November 9, 2001

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Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
	Vance 100 100 110 110 110 110 110 110 110 11		

Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::